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PTO/SB/21 (05-03)

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	•			Application Number	09/816,737							
ŀ	TD A	NONEITTAI		Filing Date	March 23	March 23, 2001						
TRANSMITTAL				First Named Inventor	BHATNA	GAR, RAJENDRA S.						
		FORM		Group Art Unit	1654							
	(to be used for all correspondence after initial filing)			Examiner Name	TELLER, ROY R.							
	Total Number o	of Pages in This Submissi	on 16	Attorney Docket Number	UCAL-223CON2							
ENCLOSURES (check all that apply)												
	Fee Transmitt	tal Form	Assi	gnment Papers an Application)		After Allowance Communication to Group						
	Fee Attached		☐ Drav	ving(s)		Appeal Communication to Board of Appeals and Interferences						
	Amendment /	Reply	Lice	nsing-related Papers		Appeal Communication to Group						
	× After Final		Petit	ion		(Appeal Notice, Brief, Reply Brief)						
_	Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Documents  Response to Missing Parts/ Incomplete Application  Response to Missing Parts under 37 CFR 1.52 or 1.53		_	ion to Convert to a isional Application		Proprietary Information						
				er of Attorney, Revocation		Notice of Appeal						
			Chai Addr	nge of Correspondence ess		Other Enclosure(s) (please						
			Term	ninal Disclaimer		identify below):						
			Regi	uest for Refund		Exhibit 1						
l						POSTCARD						
			CD,	Number of CD(s	ļ							
			Remarks									
		SIGNA	TURE OF APP	LICANT, ATTORNEY, O	R AGENT							
Signing A	Attorney/Agent o.)	CAROL L. FRANCI BOZICEVIC, FIELD	S, 36,513	-								
Signature		Caul's	and I full									
Date		September 2, 2003										

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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (05-03)

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PAPER PAPER WORK REDUCTION ACT OF 1995, NO PERSONS ARE REQU	Ted to	complete if Known								
FEE TRANSMITTAL	-	Complete if Known								
	-	Application Number				09/816,737				
for FY 2003	- 1	Filing D				March 23, 2001				
10111 2000	ľ	First Na	med I	nvento		BHATNAGAR, RAJENDRA S.				
Effective 01/01/2003. Patent fees are subject to annual revision	7. E	Examin	er Nar	ne	TELLER, RO	TELLER, ROY R.				
☐ Applicant claims small entity status. See 37 CFR 1.27	/	Art Unit 1654								
TOTAL AMOUNT OF PAYMENT (\$) 320.00	/	Attorney Docket No. UCAL-223CON2								
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)									
☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None	3. A	DDITIO	NAL							
☑ Deposit Account:		Large Entity	_	Small Entity			:			
Deposit Account Number 50-0815	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Descrip	otion	Fee Paid			
Deposit Account Name Bozicevic, Field & Francis LLP		100	0054	0.5	0	f				
The Commissioner authorized to: (check all that apply)	1051	130	2051	65 35	Surcharge – late filing	-				
☑ Charge fees indicated below ☑ Credit any overpayments ☐ Charge any additional fee(s) during the pendency of this	1052	50	2052	25	Surcharge – late prov cover sheet	visional filing ree o	or .			
application	1053	130	1053	130	Non-English specifica	-English specification				
☐ Charge fees indicated below, except for the filing fee	1812	2.520	1812	2,520	For filing a request fo	r <i>ex parte</i> reexan	nination			
to the above-identified deposit account.	1804	920*	1804	920*	Requesting publication	on of SIR prior to				
FEE CALCULATION	1805	1,840*	1805	1,840	*Requesting publication	on of SIR after				
BASIC FILING FEE     Large Entity Small Entity	4054	440	0054		Examiner action	'				
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Code (\$) Code (\$) 1001 750 2001 375 Utility filing fee	1252	410	2252	205	Extension for reply w		LTI			
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9 9	1254	1,450	2254	725	Extension for reply w		1			
	1255	1,970	2255	985	Extension for reply w	itnin fith month	220.00			
1004 750 2004 375 Reissue filing fee 1005 160 2005 80 Provisional filing fee	1401	320	2401	160	Notice of Appeal	at of an appeal	320.00			
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SUBTOTAL (1)	1403	280	2403	140	Request for oral hear	_	ding			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1451 1452	1,510 110	1451 2452	55	Petition to institute a Petition to revive – ur		sumg			
Fee from		1,300	2452	650	Petition to revive – ur					
Extra Claims below Fee Paid	1453 1501	1,300	2501	650	Utility issue fee (or re					
Total Claims -20** = x =	1502	470	2502	235	Design issue fee	13300)				
Indep3** = x = Claims	1503	630	2503	315	Plant issue fee					
Multiple Dependent =	1406	130	1460	130	Petitions to the Com	missioner				
Multiple Dependent	1807	50	1807	50	Processing fee under					
Large Entity Small Entity	1806	180	1806	180	Submission of Inform		Stmt			
Fee Fee Fee Fee Description Code (\$) Code (\$)	8021	40	8021	40	Recording each pate					
1202 18 2202 9 Claims in excess of 20	i				property (times numb	per of properties)				
1201 84 2201 42 Independent claims in excess of 3	1809	750	2809	375	Filing a submission a (37 CFR § 1.129(a))	ig a submission after final rejection CFR § 1.129(a))				
1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375		each additional invention to be nined (37 CFR § 1.129(b))				
1204 84 2204 42 ** Reissue independent claims	1801	750	2801	375	Request for Continue	ed Examination (F	RCE)			
over original patent	1802	900	1802	900	Request for expedite of a design application					
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	Other	r fee (spe	cify)							
SUBTOTAL (2) \$										
**or number previously paid, if greater, For Reissues, see above.  *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 320.00										
SUBMITTED BY Complete (if applicable)										
Name (Print/Type) Carol   Francis		ration No ley/Agen		36,5	13	Telephone	(650) 327-3400			
Name (Print/Type) Caro L. Francis	Trace I	J, ngen	·	20,0						
Signature (22.44 7 4/////						Date	09/02/2003			

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